## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10858942

| (Column 1) (Column 2)   |   |   |                                       |                                |              | mn 2)            | SMALL ENTITY TYPE |                   |                        | OR       | OTHER THAN R SMALL ENTITY |                        |  |
|---|---|---|---------------------------------------|--------------------------------|--------------|------------------|-------------------|-------------------|------------------------|----------|---------------------------|------------------------|--|
| TOTAL CLAIMS  |   |   | 18£                                   |                                |              |                  |                   | RATE              | FEE                    | <b>)</b> | RATE                      | FEE                    |  |
| FOR   |   |   | NUMBER FILED                          |                                | NUMBER EXTRA |                  | ВА                | SIC FEE           | 375.00                 | OR       | BASIC FEE                 | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 1                                     |                                | * Ø          |                  | ;                 | X\$ 9=            |                        | OR       | X\$18=                    |                        |  |
| INDEPENDENT CLAIMS  |   |   | minus 3 =  *                          |                                |              |                  |                   | X42=              |                        | OR       | X84=                      |                        |  |
| MU  | LTIPLE DEPEN  | IDENT CLAIM PI                            | RESENT                                |                                |              |                  | <b> </b>          | ·140=             |                        | OR       | +280=                     |                        |  |
| * If  | the difference  | in column 1 is                            | less than zero, enter "0" in column 2 |                                |              | olumn 2          |                   | OTAL              | 140                    | OR       | TOTAL                     |                        |  |
| CLAIMS AS AMENDED - PART II   |   |   |                                       |                                |              |                  | ·                 | J.,               |                        | l Oi i   | OTHER                     | THAN                   |  |
| _   |   | (Column 1)                                |                                       | (Colun                         |              | (Column 3)       | S                 | MALL E            | ENTITY                 | OR       | SMALL                     | ENTITY                 |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUMI<br>PREVIO<br>PAID         | BER<br>OUSLY | PRESENT<br>EXTRA | F                 | RATE              | ADDI-<br>TIONAL<br>FEE |          | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                                 | **                             |              | =                | )                 | <b>(</b> \$ 9=    |                        | OR       | X\$18=                    |                        |  |
|   | Independent   | *   | Minus                                 | ***                            | CLANA        | =                |                   | <b>K42</b> =      |                        | OR       | X84=                      |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |                                       |                                |              |                  |                   | 140=              |                        | OR       | +280=                     |                        |  |
|   |   |   |                                       |                                |              |                  |                   | TOTAL<br>DIT. FEE |                        | OR       | TOTAL<br>ADDIT. FEE       |                        |  |
| _   | pro a man and an array of   | (Column 1)                                |                                       |                                |              | ,                |                   |                   |                        |          |                           |                        |  |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA | F                 | RATE              | ADDI-<br>TIONAL<br>FEE |          | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                                 | **                             |              | =                | >                 | (\$ 9=            |                        | OR       | X\$18=                    |                        |  |
|   | Independent   | *   | Minus                                 | ***                            |              | =                | >                 | <b>(42=</b>       |                        | OR       | X84=                      |                        |  |
| <u></u>   | FIRST PRESE   | NTATION OF MU                             | JUIPLE DEF                            | ENDENT                         | CLAIM        |                  | +                 | 140=              |                        | OR       | +280=                     |                        |  |
|   |   |   |                                       |                                |              |                  | <b>L</b>          | TOTAL             |                        | OR       | TOTAL<br>ADDIT. FEE       |                        |  |
| (Column 1) (Column 2) (Column 3)  |   |   |                                       |                                |              |                  |                   |                   |                        |          | ADDII. FEET               |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUME<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA | F                 | RATE              | ADDI-<br>TIONAL<br>FEE |          | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                                 | **                             |              | =                | X                 | (\$ 9=            |                        | OR       | X\$18=                    |                        |  |
|   | Independent   | *   | Minus                                 | *** .                          |              | = _              | >                 | (42=              |                        | OR       | X84=                      |                        |  |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                                |              |                  |                   | 140-              |                        |          |                           |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |                                       |                                |              |                  |                   |                   |                        | OR       | +280=                     |                        |  |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                       |                                |              |                  |                   |                   |                        |          |                           |                        |  |